PILOT EXPERIENCE SHEET

NAME:			DATE:		_
(This form must be completed in full)					
1. a. MILITARY FLIGHT TIME . TOTAL:					
	TYPE ACFT	TOTAL PILOT TIME	ACFT CDR TIME	INSTRUCTOR PILOT TIME	INSTRUMENT TIME
F/W MULTI ENGINE					
F/W SINGLE ENGINE					
R/W MULTI ENGINE					
R/W SINGLE ENGINE					
b. FORMAL MILITARY TRAINING (check appropriate box):					
FLIGHT SAFETY OFFICER			AIRCRAF OFFICER	T MAINTENANCE	Ē
2. CIVIL FLIGHT TIME.	TOTAL:				
	TYPE ACFT	TOTAL PILOT TIME	ACFT CDR TIME	INSTRUCTOR PILOT TIME	INSTRUMENT TIME
F/W MULTI ENGINE					
F/W SINGLE ENGINE					
R/W MULTI ENGINE					
R/W SINGLE ENGINE					
3. FAA PILOT RATINGS HELD:					
4. DATE COMMISSIONED: SOURCE:					
5. DATE OF FIRST FLIGHT, AS AN OFFICER, IN MILITARY AIRCRAFT:					
6. FLIGHT TRAINING SOURCE:					
PIPELINE: (check appropriate box(es))					
DATE GRADUATED:					
7. DATE LAST FLEW MILITARY A/C:			TYPE:		
8. DATE LAST FLEW CIVIL A/C:			TYPE:		